

National Night Out 2022
Participation Form
RETURN FORM BY May 1, 2022

Community Name: _____

- ☐ Yes, our community will participate.

Location of Event (Provide physical address if applicable.) _____

Time of Event: _____

Coordinator's Name _____

Coordinator's Phone Number: _____

Coordinator's Address: _____

Coordinator's E-Mail Address: _____

- ☐ No, our community will not participate.

Please indicate the size t-shirts you need (not to exceed 5), the number of hats (not to exceed 5) and whether you need a banner.

Item	Quantity Needed*
5 Volunteer t-shirts	Sizes: Youth L = S = M = L = XL = XXL =
Volunteer hats	
Banner (1 only)	

Police Wish-List (personnel or demonstrations from the Sheriff's Office and Maryland State Police, Barrack "U"):

1. _____
2. _____
3. _____
4. _____